

Commonwealth of Massachusetts

Board of Bar Examiners

Instructions for Completing Application for Admission Pursuant to Massachusetts Supreme Judicial Court Rule 3:01, Section 6 (Admission on Motion)

The entire application consists of four parts:

Form A: Petition for Admission to the Bar of the Commonwealth of Massachusetts: completed and signed by you and an attorney of any state, district, or territory of the United States.

Form B: Applicant's Statement to the Board of Bar Examiners: completed and signed by you, including any necessary attachments, rider pages, etc.

MPRE Form: A copy (official or unofficial) of your Multistate Professional Responsibility Examination (MPRE) Score Report showing a scaled score of 85 or greater. (Please note that the MPRE must be taken and passed before filing the application.)

NCBE Form: The National Conference of Bar Examiners (NCBE) Request for Preparation of a Character Report (Standard-01 Version): completed and signed by you, including any necessary attachments, rider pages, etc.

FORMS A and B

*In addition to **completing** Forms A and B, you must include the following with those forms:*

1. **The application fee of \$1,015.00**, made payable to the Commonwealth of Massachusetts in the form of a certified bank check or money order. **PERSONAL CHECKS ARE NOT ACCEPTED. THIS FEE IS NON-REFUNDABLE.**
2. **Current** (within 90 days) certificate(s) from the proper court officer(s), under SEAL OF COURT, from all states to which you are admitted, showing the date of your admission to the bar and that you are in current good standing.
3. **You shall submit letters of recommendation for admission, addressed to the Board of Bar Examiners, from three members of the bar of the Commonwealth, or of the state, district or territory of prior admission, or of the bar of the state, district or territory in which you have last resided.** The letters should state the nature and extent of the author's acquaintance with you and their personal knowledge as to the length and continuity of your practice of law and as to your outside work, if any, and the author's belief as to your moral character and fitness to be admitted to the Bar of the Commonwealth of Massachusetts. Include at least three (3) letters. If possible, include one or more letters from members of the Bar of the Commonwealth of Massachusetts, covering the points above-mentioned.
4. If possible, a letter from a judge of one of the courts in the state or jurisdiction where you are admitted (*optional*).
5. Questions regarding **Forms A and B** may be directed to the Board of Bar Examiners at (617) 482-4466.

MULTISTATE PROFESSIONAL RESPONSIBILITY EXAMINATION
(MPRE) SCORE REPORT FORM

1. You must take and pass, with a scaled score of 85 or greater, the MPRE prior to filing an application. A copy of your MPRE score report is required. You must attach this score report to your application.
2. The MPRE is a separate examination administered by the National Conference of Bar Examiners (NCBE) thrice yearly: March, August, and November.
3. If you have **already taken and passed the MPRE** (85 scaled score or greater) and wish to obtain a copy of your score report, you may contact the NCBE at **319-337-1304**.
4. **If you have not taken the MPRE** and need to make arrangements to do so, you may contact the NCBE at **319-341-2500**.
5. **Should you wish to contact the MPRE Department in writing**, the address and web site is as follows:

National Conference of Bar Examiners
MPRE Applications Department
P.O. Box 4001
Iowa City, Iowa 52243
www.ncbex.org

**NATIONAL CONFERENCE OF BAR EXAMINERS REQUEST FOR PREPARATION OF A
CHARACTER REPORT (NCBE FORM)**

- (a) Complete the Request for Preparation of a Character Report (Standard-01 Version) in accordance with Board of Bar Examiners' Rule IV.
- (b) The fee of \$250.00 made payable to the National Conference of Bar Examiners. NCBE permits payment of this fee by credit card (see NCBE Form). Otherwise, payment must be made by certified bank check or money order. **PERSONAL CHECKS ARE NOT ACCEPTED.**
- (c) The NCBE Form and fee must be returned, together with Forms A, B and your MPRE Form to the Supreme Judicial Court Clerk's Office for Suffolk County. **DO NOT SEND THE NCBE FORM DIRECTLY TO NCBE, AS IT WILL NOT BE ACCEPTED.**
- (d) Questions regarding the NCBE Form are properly directed to NCBE at (608) 280-8550.

INSTRUCTIONS FOR FILING APPLICATION:

THE ENTIRETY OF THE AFOREMENTIONED DOCUMENTS, FORMS A and B, the MPRE FORM, NCBE FORM, AND ALL SUPPORTING DOCUMENTS, MUST BE FILED WITH THE FOLLOWING:
**SUPREME JUDICIAL COURT
CLERK'S OFFICE FOR SUFFOLK COUNTY
One Beacon Street, Fourth Floor
Boston, Massachusetts 02108**

Failure, in any way, to fully complete this application or attach supporting documents will result in your application being returned to you.

Commonwealth of Massachusetts

Board of Bar Examiners

CHECKLIST FOR APPLICATION FOR ADMISSION ON MOTION

Before filing, please ensure that all places requiring a signature have been signed, and that you have **fully** answered each question.

Your application materials **must** include the following:

- Form A: Petition for Admission to the Bar of the Commonwealth of Massachusetts
- Form B: Applicant's Statement to the Board of Bar Examiners
- A copy (official or unofficial) of your MPRE score report (MPRE Form) showing a scaled score of 85 or greater. Merely requesting that the testing company forward your score to Massachusetts is not sufficient; **you must attach a copy of your score report.**
- The National Conference of Bar Examiners Request for Preparation of a Character Report (NCBE Form)
- The fees:
 - \$1,015.00 fee made payable to the Commonwealth of Massachusetts in the form of a bank check or money order **ONLY**.
 - \$250.00 fee made payable to the National Conference of Bar Examiners in the form of a bank check or money order. NCBE also permits payment by credit card.
- Current (within 90 days) certificate evidencing your admission and good standing (under seal of court) from each state to which you are admitted to practice law.
- Three letters of recommendation: **These letters are a separate requirement from the Petition for Admission (Form A), which calls for the signature of a recommending attorney.**
- **FILING:** You must file your application at the following:

Supreme Judicial Court
Clerk's Office for Suffolk County
One Beacon Street, Fourth Floor
Boston, Massachusetts 02108

Important Information for Applicants Applying for Admission Pursuant to Massachusetts Supreme Judicial Court Rule 3:01, Section 6 (Admission on Motion)

Process of Admission on Motion:

Admission on motion takes approximately four to six (4-6) months. NCBE performs a thorough background investigation, which takes time. To expedite your application, any references provided by you on the NCBE Form should be advised that the sooner they respond, the sooner your investigation will be completed.

Once the NCBE report is received, the Board of Bar Examiners will review your application for admission on motion and said report. If the Board finds your moral character, acquirements and qualifications to be sufficient, your name will be sent to the Clerk of the Supreme Judicial Court for Suffolk County, as well as each county clerk throughout the Commonwealth of Massachusetts to be posted for a period of not less than 10 days. You will receive written notification that your name has been posted, and, if no objection is made, at the closing of the ten days, you will be found qualified for admission by the Board of Bar Examiners. You should expect admission materials within two weeks after the posting from the Supreme Judicial Court Clerk's Office for Suffolk County (617) 557-1175.

Admission Questions:

Once you have been found qualified for admission by the Board of Bar Examiners, any questions regarding your admission are properly directed to the Clerk's Office at the above-listed number.

CIVIL NO.

SUFFOLK, SS.

IN THE MATTER OF

.....
Type or Legibly Print Name

PETITION FOR ADMISSION
TO THE BAR OF THE COMMONWEALTH OF MASSACHUSETTS
Pursuant to Supreme Judicial Court Rule 3:01, Section 6 (Admission on Motion)

MOTION APPLICATION

Petition Filed _____
(Court Use Only)

COMMONWEALTH OF MASSACHUSETTS

Suffolk, SS.

Supreme Judicial Court
for Suffolk County

FORM A

**PETITION FOR ADMISSION TO THE BAR OF THE
COMMONWEALTH OF MASSACHUSETTS**

Pursuant to Supreme Judicial Court Rule 3:01, §6

I, _____, hereby apply for
TYPE OR PRINT FULL NAME

for admission to the bar of the Commonwealth. I represent that I am of good moral character

and over the age of eighteen years, having been born on _____.

I further represent that I was duly admitted as an attorney of the highest judicial court of the

State of _____ on the _____ day of _____,
(day) (month)
_____, and that I have engaged in the actual practice or teaching of law in
(year)

(state location and nature of practice/teaching)

from _____ to _____. * (Attach rider page if necessary)

Signed: _____
Applicant's Signature

Address: _____

(Include City, State, and Zip Code)

Date: _____

**RECOMMENDATION OF A MEMBER OF THE BAR OF THE COMMONWEALTH OF MASSACHUSETTS
OR OF ANY STATE, DISTRICT OR TERRITORY OF THE UNITED STATES**

(Supreme Judicial Court Rule 3:01, subsection 1.2)

I, _____, an attorney of the bar of
Type or Print Full Name

_____, respectfully recommend that the foregoing petition be granted,

and certify that the petitioner is of good moral character.

Attorney's Signature _____

Business Address: _____

Telephone #: _____

Attorney's State Registration Number: _____

Date: _____

APPLICANT'S STATEMENT TO THE BOARD OF BAR EXAMINERS
FORM B

In the matter of _____

APPLICANT FOR ADMISSION AS AN ATTORNEY AT LAW
(Pursuant to Supreme Judicial Court Rule 3:01, §6)1. Please type or print **LEGIBLY** using **BLACK INK ONLY**:

(a) Full Name:

First Middle Name or Initial Last

(b) Home Address: _____

City _____ State _____ Zip _____ Telephone Number _____

(c) Present Occupation and Business Address: _____
(Present Occupation)Name of Company/Firm (do not abbreviate) _____
Address: _____

City _____ State _____ Zip Code _____ Telephone Number _____

(d) Place of Birth _____ Date of Birth _____
City and State MM/DD/YY

AGE: _____ SEX: _____

(e) Social Security Number: _____

(f) Have you ever been known by another name or surname (if yes, please state names, places and dates): _____
Yes or No

(g) Are you:

i) a citizen of the United States? _____
Yes or Noii) a resident alien who intends to become a citizen? _____
Yes or No

iii) or other _____ Please explain: _____

FORM B (continued)

- (h) If you have ever been a member of the Armed Services, state the type of discharge, the circumstances surrounding your release, whether ever disciplined, and the details thereof, where the record can be obtained, your service number and rank, and the branch and dates of actual service.

2. State every residence you have had during the last ten years or since admission to the bar, whichever is longer (attach rider page, if necessary).

City and State	Street Name/Number	Zip Code	From (mo. & yr.)	To (mo. & yr.)
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
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<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

3. State all colleges and universities attended and indicate information requested below:

- (a) College or university other than law study:

<hr/>	<hr/>	<hr/>	From <hr/>	To <hr/>
Name	Location	Degree		
<hr/>	<hr/>	<hr/>	From <hr/>	To <hr/>
Name	Location	Degree		
<hr/>	<hr/>	<hr/>	From <hr/>	To <hr/>
Name	Location	Degree		

FORM B (continued)

(b) Law study:

Law school: _____
(Name) (Location)

Dates of attendance: From _____ To _____

Degree(s) (if any) _____

If applicable, provide additional law schools attended here:

Law school: _____
(Name) (Location)

Dates of attendance: From _____ To _____

Degree(s) (if any) _____

4. Were you ever reprimanded, sanctioned, or disciplined in or suspended or expelled from college, university, or law school? _____ If yes, state the facts fully.

Yes or No

5. State **every application** made by you and **every examination** taken by you for admission to the bar. (This should include applications for reinstatement and any applications subsequently withdrawn) State as to each application the date, the name and address of the authority to whom it was addressed and the disposition made, with the reasons therefor; state as to each examination the date and whether successful or unsuccessful. (*Attach additional sheets if necessary.*)

6. Name all jurisdictions and courts in which you have been admitted to practice law. Give the dates of admission to practice (attach additional sheets if necessary).

Jurisdiction(s)	Court(s)	Date(s) of Admission
_____	_____	_____
_____	_____	_____
_____	_____	_____

FORM B (continued)

7. Have you been entitled to practice in each of the locations specified under question 6 and before each court continuously from the date you first became entitled until the date hereof?

Yes or No

If not, state the dates during which you have not been so entitled, the nature of the disqualification(s), the facts, and **attach a copy (or copies) of the record(s) thereof.**

- 8.(a) Have you ever been disbarred, suspended, reprimanded, censured, admonished or otherwise disciplined or disqualified as an attorney, or as a member of any other profession, or as a holder of any public office? _____

Yes or No

If yes, state the dates, the details and **attach a copy of the record thereof.**

- (b) Have any charges or complaints been made concerning your conduct as an attorney, or as a member of any profession, or as a holder of any public office? _____

Yes or No

If yes, state the dates, the details and **attach a copy of the record thereof.**

9. Have you ever held any judicial office? _____ If yes, state where, when, offices held, and, if terminated, reasons therefor. Yes or No

10. Give the name and location of each bar association of which you are or have been a member.

FORM B (continued)

11. With respect to your legal career, please state **all** of your employment (including temporary or part time employment in the last ten years) **beginning with your most recent employment**. Include military service if in a legal capacity and self-employment.

(a) **Month and year of beginning and ending employment period:** FROM _____ TO _____

Name of employer or firm (individual, partnership, or corporation) _____
DO NOT ABBREVIATE

Address _____
Street City State Zip Code Country

Provide a complete description of your work, including whether it was **full time, part time, or otherwise** and whether you were a principal, partner, associate, sole practitioner, or otherwise employed.

Present address of above employer (if self-employed, or if firm now defunct, give name and address of an associate or reference who can verify).

Reason for Leaving: _____

(b) **Month and year of beginning and ending employment period:** FROM _____ TO _____

Name of employer or firm (individual, partnership, or corporation) _____
DO NOT ABBREVIATE

Address _____
Street City State Zip Code Country

Provide a complete description of your work, including whether it was **full time, part time, or otherwise** and whether you were a principal, partner, associate, sole practitioner, or otherwise employed.

Present address of above employer (if self-employed, or if firm now defunct, give name and address of an associate or reference who can verify).

Reason for Leaving: _____

FORM B (continued)

(LEGAL EMPLOYMENT HISTORY, continued – if applicable)

(c) Month and year of beginning and ending employment period: FROM _____ TO _____

Name of employer or firm (individual, partnership, or corporation) _____
DO NOT ABBREVIATE

Address _____
Street City State Zip Code Country

Provide a complete description of your work, including whether it was **full time, part time, or otherwise** and whether you were a principal, partner, associate, sole practitioner, or otherwise employed.

Present address of above employer (if self-employed, or if firm now defunct, give name and address of an associate or reference who can verify).

Reason for Leaving: _____

(d) Month and year of beginning and ending employment period: FROM _____ TO _____

Name of employer or firm (individual, partnership, or corporation) _____
DO NOT ABBREVIATE

Address _____
Street City State Zip Code Country

Provide a complete description of your work, including whether it was **full time, part time, or otherwise** and whether you were a principal, partner, associate, sole practitioner, or otherwise employed.

Present address of above employer (if self-employed, or if firm now defunct, give name and address of an associate or reference who can verify).

Reason for Leaving: _____

If you need to attach rider pages for additional employment, please do so in the above-shown format.

FORM B (continued)

12. List any other employment you have held within the last ten years, or since admission to the bar, whichever period of time is longer, that is not included in Question 11. Include temporary or part time work, especially legal clerkships. (If you had a professional or business career before completing law study, include it also.)

Month & Year of Beginning and Ending Period of Employment: _____

Name, Address of Employer & Nature of Business: _____

DO NOT ABBREVIATE

Present Name & Address of Employer (if different): _____

Position held and description of work: _____

Immediate Supervisor & Present Address: _____

Reason for Leaving: _____

Month & Year of Beginning and Ending Period of Employment: _____

Name, Address of Employer & Nature of Business: _____

DO NOT ABBREVIATE

Present Name & Address of Employer (if different): _____

Position held and description of work: _____

Immediate Supervisor & Present Address: _____

Reason for Leaving: _____

Month & Year of Beginning and Ending Period of Employment: _____

Name, Address of Employer & Nature of Business: _____

DO NOT ABBREVIATE

Present Name & Address of Employer (if different): _____

Position held and description of work: _____

Immediate Supervisor & Present Address: _____

Reason for Leaving: _____

(Attach rider pages, if necessary, in the above -shown format)

FORM B (continued)

- 13.(a) Have you ever held a license, other than as an attorney at law, the procurement of which required proof of good character (e.g., certified public accountant, patent attorney, real estate broker, etc.)?

Yes or No

If yes, as to each license, state the date it was granted, and the name and address of issuing authority.

- (b) State every other application made and examination taken by you for a license granted by a state or for an official position, the procurement of which required proof of good character, EXCEPT APPLICATIONS FOR ADMISSION TO THE BAR. As to each application, state the date, the name and the disposition made with the reasons therefor; as to each examination, state the date and whether successful or unsuccessful.

- (c) If any such license has been suspended or revoked, give the date of the revocation or suspension, reasons for the action taken, and the name and address of the authority in possession of the record(s) thereof.

- (d) Have any complaints been made against you with any licensing authority? If so, state the dates, the details, and the results thereof, and identify the authority possessing the record(s) thereof.

14. Has any surety on any bond on which you were the obligor been required to pay any money on your behalf? _____ If yes, state the facts fully.

Yes or No

(Attach rider pages if necessary)

FORM B (continued)

15. Are there any unsatisfied judgments or court orders of continuing effect against you?

Yes or No

If yes, state the facts fully, giving names and addresses of creditors, amounts, dates and the nature of debts, judgments or court orders, and the reason for nonpayment of unsatisfied judgments or any noncompliance with court orders.

16. (a) Have you ever been charged with or been the subject of any investigation for a felony or misdemeanor other than a minor traffic charge? _____ If yes, state the dates, courts, details and results (additional space below). Yes or No

- (b) Have you ever been a party on either side in a civil action or proceeding involving a claim of fraud, conversion, breach of fiduciary duty, professional malpractice or other wrongful conduct? _____

Yes or No

- (c) Have you ever been adjudged bankrupt or insolvent? _____
Yes or No

GIVE FULL DETAILS for affirmative responses to Questions 16(a), (b) and (c) including dates, exact name and location of court, if any, case numbers, references to the court records, if any, the facts, the disposition of the matter; if no court records are available, give to the best of your ability the names and addresses of all persons involved, including counsel.

(Attach rider pages if necessary)

CERTIFICATE

I, the applicant, certify that each of the foregoing answers is true, complete and candid and that I have not altered the wording of any question.

Dated this _____ day of _____, _____

Applicant's Signature: _____